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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-878)						SERIAL NO.	FILING DATE	
						10/088368		
						APPLICANT(S)		
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
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TOTAL IND.			1					
TOTAL DEP.			4					
TOTAL CLAIMS			5					
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS								
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FORM PTO-1360 (REV. 3-78)								
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